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## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address) 02/08/2006 20350 Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. TOWNSEND AND TOWNSEND AND CREW, LLP TWO EMBARCADERO CENTER EIGHTH FLOOR SAN FRANCISCO, CA 94111-3834 (Depositor's name) Flanders Bruce L. 03/07/2006 WABDELR3 00000123 201430 10826543 TOUGH (Signatur *][[[* 2006 700.00 DA March 6, (Date 01 FC:2501 02 FC:1504 <u>የሰብ ሰብ ከ</u>ወ CONFIRMATION NO. ATTORNEY DOCKET NO. FIRST NAMED INVENTOR (3 FREBUDATION NO. 30.00 DATE 2148 087913-000000US 10/826\_543 04/15/2004 Ming-Jeng Shue TITLE OF INVENTION: INTRAVENOUS CATHETER INTRODUCING DEVICE DATE DUE PUBLICATION FEE TOTAL FEE(S) DUE SMALL ENTITY ISSUE FEE APPLN. TYPE 05/08/2006 \$1000 YES \$700 \$300 nonprovisional CLASS-SUBCLASS ART UNIT EXAMINER - 604-164010 THANH, LOAN H 3763 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Townsend and Townsend 2. For printing on the patent front page, list and Crew LLP (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE ☐ Individual ☐ Corporation or other private group entity ☐ Government Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. Publication Fee (No small entity discount permitted) The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-1430 (enclose an extra copy of this form). Ø Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. DateMarch 6, 2006 Authorized Signature Registration No. 24,491 Typed or printed name I. Georg Seka

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Atty Docket No. 087913-000000US

ATTENTION:

Examiner Loan H. Thanh

Group Art Unit 3763

## OFFICIAL COMMUNICATION FOR THE PERSONAL ATTENTION OF EXAMINER Loan H. Thanh

## CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of Ming-Jeng Shue, et al., Application No. 10/826,543, filed April 15, 2004 for INTRAVENOUS CATHETER INTRODUCING DEVICE are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

## Documents Attached

- 1. Form PTOL-85 Fees Transmittal
- 2. Copy of Form PTOL-85 Fees Transmittal

Number of pages being transmitted, including this page: 3

Dated: March 6, 200

Bruce L. Flanders

PLEASE CONFIRM RECEIPT OF THIS PAPER BY RETURN FACSIMILE AT (415) 576-0300

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